



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E417803**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	15-01019	
LOCAL AGENCY CODING		
TOTAL # OF UNITS	02	OBJECT STRUCK

TRIBAL RESERVATION	
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M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION 04 - 20 - 2015	0837	31		0664
ON (PRIMARY TRAFFIC WAY) INTERSECTION <input type="checkbox"/> NON-INTERSECTION <input checked="" type="checkbox"/>				

20TH ST SE	BLOCK NO. <input checked="" type="checkbox"/>	8400
MILE POST <input type="checkbox"/>		

DISTANCE	OF (REFERENCE OR CROSS STREET)
400 MILES <input type="checkbox"/> N <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> S <input type="checkbox"/> W	83RD AVE SE

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 2065515995
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LAST NAME	JONES	FIRST NAME	GABRIELLE	MIDDLE INITIAL	M
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STREET NEW ADDRESS	9408 13TH PL SE
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CITY	LAKE STEVENS	ST	WA	ZIP	98258
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	JONESGM08020	STATE	WA	SEX	F	D.O.B. MMDDYYYY	05 - 20 - 1992
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 9	EJECT 1	HELMET USE 2	INJURY CLASS 1	NATURE OF INJURIES
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LICENSE PLATE #	631XIN	STATE	WA	VIN#	4S2DM58W244312206
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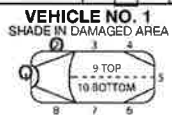
TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2004	MAKE	ISU	MODEL	RODEO	STYLE	UT	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY # PROGRESSIVE 904054892
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE
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LAST NAME	MARTIN	FIRST NAME	DEANNA	MIDDLE INITIAL	M
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STREET NEW ADDRESS	9911 38TH PL SE
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CITY	LAKE STEVENS	ST	WA	ZIP	982585717
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	MARTIDM057NZ	STATE	WA	SEX	F	D.O.B. MMDDYYYY	08 - 09 - 1995
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 9	EJECT 1	HELMET USE 2	INJURY CLASS 1	NATURE OF INJURIES
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LICENSE PLATE #	AGK0944	STATE	WA	VIN#	JH4UA2653TC018684
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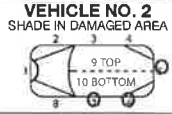
TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	1996	MAKE	ACUR	MODEL	25TL4D	STYLE	4D	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	JAMES MARTIN 9911 38TH PL SE LAKE STEVENS WA 98258
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LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY # AMERICAN FAMILY MUTUAL 2002-1618-03-61-FPPA-WA
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VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	W. AUKERMAN	BADGE OR ID #	72	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E417803**

CASE # **15-01019**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NARRATIVE

On 04/20/2015 at about 0837 hours (all times approximate) I responded to a police dispatched report of a female yelling in the middle of the roadway in the area of 85th Ave and 20th Street SE in the city of Lake Stevens. Arriving on scene I found the incident to be a two car non-injury/non-blocking vehicle collision.

I spoke to both driver's involved in the collision; there were no identified witnesses.

Based on evidence and statements made at the scene it is found U2 had been stopped in the roadway in backed up traffic in the westbound lane of 20th Street SE about 400 feet east of the traffic light controlled intersection of 83rd Ave SE. U1 had been traveling westbound in the westbound lane of travel in the 8400 block of 20th Street SE and failed to notice stopped traffic ahead of U1. When the driver of U1 realized traffic was stopped ahead, the driver of U1 applied emergency braking; leaving about 63 feet of tire skid. U1 was unable to stop and struck the back of U2 with enough force to cause reportable vehicle damage and flatten the passenger front tire of U1.

There were no reported injuries at the scene of the collision. U2 drove from the scene and U1 also drove from the scene after the front tire had been replaced with a spare tire.

I took several digital images of the involved vehicles and collision scene. The digital images were then saved to a CD-RW and logged as evidence.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

W. AUKERMAN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

04-20-15 12:26 PM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

4/21/2015 2:35:29 AM

BADGE OR ID #

72

ORI #

WA0311900

TIME POLICE DISPATCHED

8:37 AM

TIME POLICE ARRIVED

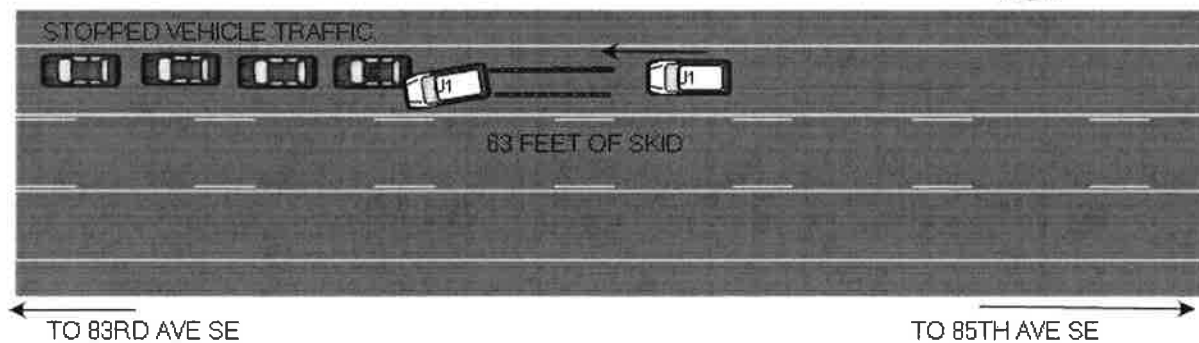
8:42 AM

OFFICER DID NOT OBSERVE COLLISION

NOT TO SCALE



8400 20TH STREET SE



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-01019

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Deanna Martin	RACE W	ETH W	SEX F	DOB 08/09/95	AGE 19	HGT 5'5"	WGT 130	HAIR Brown	EYES Green
STREET ADDRESS 9111 38th Pl SE		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS WA		
HOME PHONE 425-293-4724		CELL PHONE 425-328-0191		PLACE OF EMPLOYMENT Red Robin						
WORK PHONE		EMAIL ADDRESS deannamartin10@gmail.com								

I, Deanna Martin, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was at a Stop light and a white Car hit me from behind

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Deanna Martin</u>	DATE SIGNED 4/20/15	LOCATION SIGNED 83rd Ave SE
OFFICER/NUMBER: <u>Auger # 72</u>	DATE SIGNED 4-20-15	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-01019

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Jones M	RACE White	ETH	SEX F	DOB 5/20/92	AGE 22	HGT 5'6	WGT 156	HAIR	EYES
STREET ADDRESS 9408 13th Pl SE		CITY Lake Stevens			STATE WA	ZIP 98258	RES. STATUS			
HOME PHONE		CELL PHONE 206-551-5995			PLACE OF EMPLOYMENT Crystal Creek Cafe					
WORK PHONE		EMAIL ADDRESS gabrielle.j520@gmail.com								

I, Jones, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

could not slow down in time to miss the deer - ~~swerved~~ swerved to the left to avoid collision but hit left back bumper instead.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Jones</u>	DATE SIGNED 4/20/15	LOCATION SIGNED
OFFICER/NUMBER: <u>Aukerman #72</u>	DATE SIGNED 4-20-15	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <i>AUERMAN * 72</i>		Case Number <i>15-01019</i>	
Type of Crime: <u>Felony / Misdemeanor (Circle)</u>		Type of Case: <i>COLLISION</i>		Date/Time:	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification			

Item # Action #	1	Item <i>CD-RW</i>	Brand Name <i>COMPUTER SONY</i>	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found <i>8400 20 ST SE LKS</i>	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions <i>PICS</i>								

Item # Action #		Item	Brand Name	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item # Action #		Item	Brand Name	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item # Action #		Item	Brand Name	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item # Action #		Item	Brand Name	Storage Location	Disposition			
		Brand/Model/Caliber (Further Description)						
		Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File





EXCHANGE OF INFORMATION

OFFICER NAME: **W. AUKERMAN #72**
AGENCY: **LAKE STEVENS PD**

COLLISION: **04/20/15 08:37 AM**
DISPATCH: **04/20/15 08:37 AM**
ARRIVAL: **04/20/15 08:42 AM**

CASE#: **15-01019**
LOCATION: **20TH ST SE BN:8400**
AT 83RD AVE SE

NARRATIVE/NOTES:

UNIT 1:	MOTOR VEHICLE -	2004 RODEO PLATE: 631XIN (WA)	TOWED BY:
DRIVER: GABRIELLE M JONES		VEH OWNER:	
ADDRESS: 9408 13TH PL SE LAKE STEVENS, WA 98258		ADDRESS:	
DL #: JONESGM080KO		STATE: WA	
PHONE:		PHONE:	
ALT PHONE:		ALT PHONE:	
INSURED BY: PROGRESSIVE		INSURED BY:	
POLICY #: 904084892		POLICY #:	

UNIT 2:	MOTOR VEHICLE -	1996 25TL4D PLATE: AGK0944 (WA)	TOWED BY:
DRIVER: DEANNA M MARTIN		VEH OWNER: JAMES A MARTIN	
ADDRESS: 9911 38TH PL SE LAKE STEVENS, WA 982585717		ADDRESS: 9911 38TH PL SE LAKE STEVENS, WA 98258	
DL #: MARTIDM057NZ		STATE: WA	
PHONE:		PHONE:	
ALT PHONE:		ALT PHONE:	
INSURED BY: AMERICAN FAMILY MUTUAL		INSURED BY: AMERICAN FAMILY MUTUAL	
POLICY #: 2002-1618-03-61-FPPA-WA		POLICY #: 2002-1618-03-61-FPPA-WA	

Incident History for: #SS15007619

Case Numbers: \$\$\$15001019

Entered 04/20/15 08:37:33 BY SPCT06 SP0387

Dispatched 04/20/15 08:37:57 BY SPDP17 SP0112

Enroute 04/20/15 08:37:57

Onscene 04/20/15 08:42:58

Closed 04/20/15 09:34:39

Initial Type: THAZ Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS003 Fire BLK: AG1418 Map Page: 397D-4 Group: SS1 Beat: SOUT

Src: T

Loc: 20 ST SE/85 DR SE ,LKS (V)

Loc Info: ON 20

Name: SCHRADER, DANA

Addr:

Phone: 2064372785

/0837 (SP0387) ENTRY ,AC, NOW, F STANDING IN MIDDLE OF ROAD YELLING

/0837 (SP0112) DISPER 19D2 #SS72 AUKERMAN, OFFICER (WAYNE)

/0838 (SP0387) SUPP LOC: ON 20,

TXT: LOOKS LIKE THERE MIGHT HAVE BEEN A COL AS W
ELL, NOT SURE, F WAS YELLING AND KICKING HER LEG
S AT CARS

/0839 SUPP NAM: SCHRADER, DANA,

PHO: 2064372785,

TXT: 2 VEHS WERE PARKED IN MIDDLE OF ROAD, ND ON
VEH, F YELLING WFA, 28YO, PINK HAIR, BLK CLOTHE
S

/0842 (SS72) *ONSCNE 19D2

/0843 (SP0112) ONSCNE 19D2

/0843 CHANGE TYP: THAZ

---> COL

/0851 (SS72) *ASNCAS 19D2 \$\$\$15001019

/0851 REMINQ 19D2 MDTVEH,631XIN,,WA,,,,,,,,,

/0851 REMINQ 19D2 MDTWANT,JONES,GABRIELLE,M,052092,,WA,,,,,,,,,

/0852 REMINQ 19D2 MDTWANT,,,,,WA,JONESGM08020,,,,,,,,,

/0934 *CLEAR 19D2 D/H

,ASSIST WITH TIRE CHANGE U1

/0934 CLOSE 19D2